

Application Data Sheet**Application Information**

Application Type:: National Stage
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: Paper
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: PEPTIDE PROTEIN TRANSLATION
INHIBITOR AND THE USE THEREOF
FOR PROTEIN TRANSLATION CONTROL
0510-1133
Attorney Docket Number::
Request for Early No
Publication?::
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 7
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERTRAND
Middle Name::
Family Name:: COSSON
Name Suffix::
City of Residence:: LE CROUAIS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing LA VILLE MABILE
Address::
City of Mailing Address:: LE CROUAIS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 35290

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: LUC
Middle Name::
Family Name:: PAILLARD
Name Suffix::
City of Residence:: MONTREUIL LE GAST
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 2 RUE NOISETIERS
Address::
City of Mailing Address:: MONTREUIL LE GAST

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 35520

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: VINCENT
Middle Name::
Family Name:: LEGAGNEUX
Name Suffix::
City of Residence:: RENNES
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 22 RUE CHRISTIAN BERNON
Address::
City of Mailing Address:: RENNES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 35000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: HOWARD
Middle Name::
Family Name:: OSBORNE
Name Suffix::
City of Residence:: SAINT SENOUX
State or Province of Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: LA CHARRIÈRE

Address::

City of Mailing Address:: SAINT SENOUX

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 35580

Correspondence Information

Correspondence Customer 00466

Number::

Representative Information

Representative Customer	00466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR2004/050345	7/20/04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	03/50357	7/21/03	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::